

Bureau of Health Care Quality and Compliance

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: NVS641HOS	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 12/02/2010
NAME OF PROVIDER OR SUPPLIER DESERT SPRINGS HOSPITAL		STREET ADDRESS, CITY, STATE, ZIP CODE 2075 EAST FLAMINGO ROAD LAS VEGAS, NV 89119		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
S 000	<p>Initial Comments</p> <p>This Statement of Deficiencies was generated as a result of complaint investigation conducted in your facility on 12/02/10 and finalized on 12/02/10, in accordance with Nevada Administrative Code, Chapter 449, Hospital.</p> <p>Complaint #NV00027004 was substantiated with deficiencies cited. (See Tag S0265)</p> <p>A Plan of Correction (POC) must be submitted. The POC must relate to the care of all patients and prevent such occurrences in the future. The intended completion dates and the mechanism(s) established to assure ongoing compliance must be included.</p> <p>Monitoring visits may be imposed to ensure on-going compliance with regulatory requirements.</p> <p>The findings and conclusions of any investigation by the Health Division shall not be construed as prohibiting any criminal or civil investigations, actions or other claims for relief that may be available to any party under applicable federal, state or local laws.</p>	S 000		
S 265 SS=D	<p>NAC 449.352 Social Services</p> <p>1. A hospital shall have effective written policies and procedures for the provision of social services by the hospital staff. This Regulation is not met as evidenced by: The complaint investigative process was initiated by the Bureau of Health Care Quality and Compliance on 12/02/10. The investigation for allegation of no available social worker included interview and policy review. Based on interview and document review, the facility failed to</p>	S 265		

If deficiencies are cited, an approved plan of correction must be returned within 10 days after receipt of this statement of deficiencies.

TITLE

(X6) DATE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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S 265	<p>Continued From page 1</p> <p>produce a plan to provide appropriate social services.</p> <p>Findings Include:</p> <p>On 12/02/10 at 8:30 AM, an interview was conducted with the Manager of Case Management/ Coordinator-Business Services. The manager confirmed the facility does not have a Social Worker (SW) on-site but would contact the SW from one of their system facilities if the need for a SW should arise. The manager revealed the position has been vacant since April 2010 and the position is currently posted on the facilities job site. The manager was unaware of a formal procedure or policy currently in effect to address how the facility provides social services for the staff. The manager revealed the previous Chief Nursing Officer (CNO) had verbally instructed her on what to do in the absence of a social worker. The manager revealed the nurses would normally contact their unit's case manager for any social service issue or discharge planning needs and then the case manager would contact one of the other facility's social worker to assist them. The manager advised they have not had the need to do this during this job vacancy, as the case managers have been able to meet the patient's needs.</p> <p>An interview was conducted with the Director of Human Resources (HR) on 12/02/10 at 11:30 AM. The director confirmed the SW position is currently vacant. The position became vacant in April 2010 due to associate retiring. The HR Director revealed the position was initially posted for hire, but shortly afterwards the facility's system administration had enacted a "hiring freeze" and the position was not filled. The director advised the hiring freeze was recently</p>	S 265		

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S 265	<p>Continued From page 2</p> <p>lifted for several positions and the SW position was reposted on the facility's internet job site. A copy of the job posting was obtained. The HR Director shared they have recently received 2 applications for this position, but have not begun the interview process, pending more applications.</p> <p>At 1:30 PM on 12/02/10 this surveyor interviewed the Compliance Officer and the Manager of Case Management regarding the use of the facility's "sister" hospitals to provide SW assistance. Upon request to make telephonic contact with the other facilities to ensure their awareness of the lack of social services availability, the compliance officer revealed the other facilities were "probably not aware", as they had not notified them and would normally ask the Chief Executive Officer (CEO) to call the other facilities to request help in providing Social Services coverage. This complaint is substantiated.</p>	S 265			

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